



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/28/2024 2.a. Candidate or Committee Name: Garrett Holt
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/1/2024
4. Campaign Address: 8028 Maple Run LN
City: Knoxville State: TN Zip Code: 37919 Phone: _____
5. Candidate Home Address: 8028 Maple Run Ln
City: Knoxville State: TN Zip Code: 37919 Phone: 8653102900
Candidate Email Address: garrettholt10@hotmail.com
6. Office Sought: (include district number, if applicable) County Commission, District 4
7. Name of Political Treasurer (may be candidate): Parker Wolford
Political Treasurer Email Address: pwolf18@vols.utk.edu
8. Category or Report: (check one)
☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☒ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.
11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Candidate Signature _____ Date _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>25,348.88</u>
b. Total Receipts This Period	\$ <u>4,550.00</u>
c. Total Disbursements This Period	\$ <u>27,309.88</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>2,589.00</u>
e. Total Loans Outstanding	\$ <u>0.00</u>
f. Total Obligations Outstanding	\$ <u>0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Garrett Holt

14. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$4,550.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$4,550.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$27,309.88
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$27,309.88

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ _____
- c. Total In-Kind Contributions Received This Period \$ _____

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Daniel Middle Name: _____ Last Name: Levy

Address: 3523 Maloney Rd City: Knoxville State: TN Zip Code: 37920

Occupation: President Employer: DK Levy

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/1/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Dewhirst

Address: 123 S Gay St City: Knoxville State: TN Zip Code: 37902

Occupation: Owner Employer: Dewhirst Properties

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$250.00 Date of Contribution: 7/1/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Robert Middle Name: _____ Last Name: Gribble

Address: 9825 Giverny Circle City: Knoxville State: TN Zip Code: 37922

Occupation: Retired Employer: Retired

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/1/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Josesph Middle Name: _____ Last Name: Sigmon

Address: 1529 Britling Dr City: Knoxville State: TN Zip Code: 37922

Occupation: Retired Employer: Retired

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/15/2024 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$850.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$850.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Nannette Middle Name: _____ Last Name: Kaiser

Address: 2213 Delta Way City: Knoxville State: TN Zip Code: 37919

Occupation: Retired Employer: Retired

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/15/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Rottman

Address: 7347 Bellingham Drive City: Knoxville State: TN Zip Code: 37919

Occupation: President & CEO Employer: Stowers Machinery

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/10/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Daniel Middle Name: _____ Last Name: Smith

Address: 6513 Kingston Pike City: Knoxville State: TN Zip Code: 37919

Occupation: Counsel & Co-Owner Employer: Taskforce BPO

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 7/16/2024 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Colquitt

Address: 3921 Glenfield Drive City: Knoxville State: TN Zip Code: 37919

Occupation: Owner Employer: The Swag

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$1,800.00 Date of Contribution: 7/18/2024 Aggregate This Election: \$ \$1,800.00

Total Contributions: \$ \$4,250.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,250.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Bentley Middle Name: _____ Last Name: Marlow

Address: 322 Douglas Ave City: Knoxville State: TN Zip Code: 37921

Occupation: Owner Employer: Let's Build Knoxville

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/17/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Josh Middle Name: _____ Last Name: Henson

Address: 900 Phillips Ave City: Knoxville State: TN Zip Code: 37920

Occupation: President Employer: Henson Developments

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/22/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$4,550.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Locked on Strategies **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 217 Cammer Avenue City: Greenville State: SC Zip Code: 29605

Purpose of Expenditure: Consulting and Video Production

Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 7/1/2024

Business or Organization Name: Russell Printing Options **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1800 Grand Ave City: Knoxville State: TN Zip Code: 37916

Purpose of Expenditure: Door Hangers

Amount of Expenditure: \$ \$699.20 Date of Expenditure: \$ 7/3/2024

Business or Organization Name: _____ **OR**

First Name: Parker Middle Name: _____ Last Name: Wolford

Address: 9625 Stringtown Rd City: Strawberry Plains State: TN Zip Code: 37871

Purpose of Expenditure: Door Knocking

Amount of Expenditure: \$ \$240.00 Date of Expenditure: \$ 7/8/2024

Business or Organization Name: _____ **OR**

First Name: Cason Middle Name: _____ Last Name: Orr

Address: 2000 Wilson Rd Apt 174 City: Knoxville State: TN Zip Code: 37912

Purpose of Expenditure: Door Knocking

Amount of Expenditure: \$ \$120.00 Date of Expenditure: \$ 7/8/2024

Business or Organization Name: _____ **OR**

First Name: Andrew Middle Name: _____ Last Name: Jones

Address: 1924 Schriver Rd City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Door Knocking

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/8/2024

Total Expenditures: \$ \$6,209.20

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,209.20

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Art and Copy Partners LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3245 Peachtree Parkway City: Suwanee State: GA Zip Code: 30024
Purpose of Expenditure: Mail
Amount of Expenditure: \$ \$5,151.70 Date of Expenditure: \$ 7/17/2024

Business or Organization Name: Art and Copy Partners LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3245 Peachtree Parkway City: Suwanee State: GA Zip Code: 30024
Purpose of Expenditure: Mail
Amount of Expenditure: \$ \$4,879.49 Date of Expenditure: \$ 7/2/2024

Business or Organization Name: Art and Copy Partners LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3245 Peachtree Parkway City: Suwanee State: GA Zip Code: 30024
Purpose of Expenditure: Mail
Amount of Expenditure: \$ \$4,879.49 Date of Expenditure: \$ 7/9/2024

Business or Organization Name: _____ **OR**
First Name: Parker Middle Name: _____ Last Name: Wolford
Address: 9625 Stringtown Rd City: Strawberry Plains State: TN Zip Code: 37871
Purpose of Expenditure: Door Knocking
Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 7/21/2024

Business or Organization Name: _____ **OR**
First Name: Cason Middle Name: _____ Last Name: Orr
Address: 2000 Wilson Rd Apt 174 City: Knoxville State: TN Zip Code: 37912
Purpose of Expenditure: Door Knocking
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 7/21/2024

Total Expenditures: \$ \$22,219.88

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Garrett Holt
2. Reporting Period: Start Date: 7/1/2024 End Date: 7/22/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$22,219.88

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Chase Middle Name: _____ Last Name: Countiss
Address: 1720 Polkwright Ln City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Door Knocking
Amount of Expenditure: \$ \$90.00 Date of Expenditure: \$ 7/21/2024

Business or Organization Name: High Beam Marketing **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3011 Harrah Dr Ste R City: Spring Hill State: TN Zip Code: 37174
Purpose of Expenditure: OTT
Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 7/21/2024

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$27,309.88

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)